EMERGENCY EQUIPMENT RENTAL AGREEMENT

ORDERING OFFICE (name and address)			AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS					
			RELATING TO THIS AGREEMENT					
		2. AGREEMENT NUMBER:						
			3. EFFECTIVE DATES a. Beginning b. Ending					
CONTRACTOR a. name and address			POINT OF HIRE (location when hired)					
DRAFT- will change in 2004 – Verify with Nat'l contract on when local can be hired when finally issued(Note to Peg)			Location at Time of Hire					
			6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY					
			X CONTRACTOR (See 14.c. & d.) GOVERNMENT					
EIN/SSN: EMAIL Address: DUNS:								
c. Telephone number (day) d. Telephone number (night)		nt)	7. OPERATOR FURNISHED BY					
			X CONTRACTOR GOVERNMENT					
8. TYPE OF CONTRACTOR ("X" APPROPRIATE BOXES) SMALL BUSINESS LARGE BUSINESS SMALL DISADVANTAGED OWNED WOMEN OWNED VETERAN/DISABLED VETERAN HUB ZONE OTHER						HER		
ITEM DESCRIPTION (include make, model, year, serial number and accessories)		10. NUMBER OF	11. WORK OR DAILY		12. SPECIAL		13. GUARANTEE	
		OPERATORS	a. rate	b. unit	a. rate	b. unit	(8 or more hours)	
a. CATERING SERVICES: Catering Equipment will be furnished according to need as determined by the Contractor. Mileage is a onetime charge that takes into account all motorized catering equipment.			\$	Mile-round trip for initial mobilization and final demobilization	N/A	N/A	N/A	
Equipment may include:KITCHEN TRAILER, (Year, make model, size, serial number, license number, accessories for this and items listed below)								
PICKUP, (Year, make, model, ton, 4x4 or 4x2, short or long bed, 2 or 4 door, if ex-cab or club, license#, VIN#)		2						
TRAILER, (Year, make, model, ton, 4x4 or 4x2, short or long bed, 2 or 4 door, if ex-cab or club, license#, VIN#)								
REFRIGERATED TRAILER, (Year, make, model, ton, size, license#, Vin #)								
b. MOBILIZATION AND RELOCATION FEE: Initial mobilization or moving kitchen after initial set-up.			\$	Each	N/A	N/A	N/A	
c. DINING FACIITY: Includes tent(s), tables, chairs, and lighting to seat 100 people at one time. If tent is not used, reduce rate by \$100.00 per day. No charge after 3 days.			\$	Day	N/A	N/A	N/A	
d. FOOD PRICING: (See 14.g.)	SUPPLEMI	ENTAL FO	DDS, BEVERAGES,	AND EXT	TRA EQU	JIPMENT		
Breakfast		Fruit Juice(** Sports Drinks Ice (bag or blo	Milk (66 ½ pint servings/case)\$ Fruit Juice(**- **oz. Servings/case)\$ Fresh Fruit (88-00count).negotiated at time of order. Ice (bag or block 50 lb)\$ Coffee, Hot Tea, Hot Chocolate, Iced Tea or Lemonade \$/gal					
14. SPECIAL PROVISIONS: (a.) The General Clauses along with replacement clauses are attached and incorporated herein. See attached Federal Acquisition Regulations (FAR) clauses and the NRCG Supplemental Terms and Conditions to the General Clauses of the Emergency Equipment Rental Agreement, OF-294, and Register of Wage Determination Under the Service								
Contract Act. (b.) If requested by the contractor and personnel are available, the Government may assist vendor in setup and take down of contractor furnished dining room tent. (c.) Contractor will arrive with a minimum of 200 gallons potable water. Government will furnish potable water after that. (d.) Contractor will furnish minimum 500 gallon gray water storage unit, Government will pump and dispose of gray water. (e.) Catered food services will be in accordance with the specifications set forth in the Interagency Mobile Food Services and Shower Facilities (NFES #1276 Current Issue). (f.) Equipment may be used off-road and in backcountry situations. (g.) The number of meals counted will be recorded on NFES 1276-A, Daily Meal Order/Invoice-Mobile Food Service, signed by the Food Unit Leader and the Contractor at the end of each meal. Minimum 50 meals and maximum of 300 meals per meal period or as ordered. Minimum or maximum number may be less or exceeded, if agreed to by the Government and the Contractor, at no additional cost. (h.) IF EQUIPMENT ORDERED FROM THIS EERA IS DISPATCHED FROM BILLINGS BASE OPERATIONS, THEN THE EQUIPMENT AND FINANCIAL PACKETS MUST BE RETURNED TO BILLINGS BASE OPERATIONS FOR CLOSE-OUT, UNLESS OTHER ARRANGEMENTS HAVE BEEN MADE WITH BASE OPERATIONS, (406) 657-6000 (i.) This Emergency Equipment Rental Agreement is void if not presented with a valid Incident Specific Resource Order or Number.								
15. CONTRACTOR'S OR AUTHORIZED A	16. DATE	17. CONTR	ACTING OFFICER'S SIGI	NATURE	18.	DATE		
19. PRINT NAME AND TITLE			20. PRINT NAME AND TITLE					
			Phone No. Fax No.					

HINTS AND HELPS:

- Mobile Food Services Contract is <u>mandatory</u> source for federal wildland firefighting agencies if food preparation is needed at the incident location and the minimum number of meals anticipated to be served is more than 600 over the duration of the incident.
- M Clark- if less than 150 people in a camp and the incident is not estimated to go over 98 hours, then you don't need to use the national catering contract.
- Be sure to correct the amount and size of the supplemental foods offered.
- Make sure the Contractor knows about the deduction for no tent.
- Mary Clark, Contract Analyst, states that the meal rate cannot exceed the per diem of \$28.00 per day.
- Remind contractor that if his supplemental food is priced higher than the general public is charged, we do have the right to send a driver into town and purchase the food/drinks. The government is not obligated to buy them from the contractor.
- Must be able to store their food at the proper temperatures according to the National Food Contract. Refer may be rented by the contractor, as long as the refer owner understand the rental conditions and the liability.

CONTRACTOR INFORMATION:

- * Equipment description (See template).
- * Copy of workmen's comp coverage, or certification of exemption from state.
- * Liability insurance coverage.
- * Proof of completion of Standards for Survival and any other training that may be required for the type of equipment being signed up.
- * Proof of physical fitness test, administered by whom and when, if applicable.
- * Tax ID Number (Federal ID or Employer SSN), Duns number, and email address
- * Copy of CCR registration